

General Assembly

Substitute Bill No. 5864

February Session, 2008

_____HB05864PH_APP031708____

AN ACT CONCERNING A NURSING HOME IMPROVEMENT PLAN.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 17b-351 of the general statutes is amended by
- 2 adding subsection (c) as follows (*Effective July 1, 2008*):
- 3 (NEW) (c) On or before December 31, 2008, and annually thereafter,
- 4 the Commissioner of Social Services, in consultation with the
- 5 Commissioner of Public Health, shall complete an inventory of all
- 6 publicly funded and private pay nursing home beds in the state. On or
- before February 1, 2009, and annually thereafter, the Commissioner of
- 8 Social Services shall report to joint standing committees of the General
- 9 Assembly having cognizance of matters relating to human services and
- 10 public health on the results of the inventory, in accordance with
- 11 section 11-4a. The Commissioner of Social Services shall identify in
- 12 such report any geographic areas in the state that are in need of
- 13 additional nursing home beds and the number of beds needed in such
- 14 geographical areas. The Commissioner of Social Services shall also
- 15 identify any areas of the state in which there is a surplus of nursing
- 16 home beds.
- 17 Sec. 2. (NEW) (Effective July 1, 2008) In addition to the requirements
- set forth in sections 17b-352 to 17b-354, inclusive, of the general
- 19 statutes or the 2008 supplement to the general statutes, the
- 20 Commissioner of Social Services, when determining whether to

21 approve a certificate of need request from a facility, as defined in 22 section 17b-352 of the 2008 supplement to the general statutes, shall 23 consider the following factors: (1) The inventory of nursing home beds 24 for the particular geographic region, (2) the age of the facility seeking 25 the certificate of need, and (3) whether the model of long-term care 26 afforded by such facility is consistent with the state's long-term care 27 plan developed pursuant to section 17b-337 of the 2008 supplement to 28 the general statutes. After considering such factors, the commissioner 29 shall grant, modify or deny the request for a certificate of need in 30 accordance with this section and said sections 17b-352 to 17b-354, 31 inclusive. The commissioner may deny a facility's request for a 32 certificate of need if the commissioner determines that the proposed 33 capital project is inconsistent with achieving the objectives of the state's 34 long-term care plan. The commissioner shall give priority to approval 35 of capital projects that: (A) Promote the development of alternative 36 models of long-term care that are consistent with the state's long-term 37 care plan, including, but not limited to, the Green House model and 38 the Small House model; and (B) increase long-term care options in 39 geographic regions of the state where there is a shortage of nursing 40 home beds.

- Sec. 3. (NEW) (*Effective October 1, 2008*) (a) For purposes of this section:
- 43 (1) "Department" means the Department of Public Health;
 - (2) "Direct care" means hands-on-care provided to residents of nursing homes, including, but not limited to, feeding, bathing, toileting, dressing, lifting and moving such residents, but does not include food preparation, housekeeping or laundry services, except when such services are required to meet the needs of any such resident on an individual situational basis. Direct care shall not include care provided by paid feeding assistants, as defined in 42 CFR 488.301; and
- 51 (3) "Nursing home" has the same meaning as provided in section 52 19a-537 of the general statutes.

44

45

46

47

48

49

50

- (b) On and after July 1, 2009, each nursing home licensed by the department pursuant to chapter 368v of the general statutes shall, as a condition of continued licensure, develop, and upon request of the department, make available for inspection a nurse staffing plan that is sufficient to provide adequate and appropriate delivery of health care services to patients in the ensuing period of licensure. The nurse staffing plan shall promote a collaborative practice in the nursing home that enhances patient care and the level of services provided by nurses and other members of the nursing home's patient care team.
- (c) Each nursing home shall establish a staffing committee that shall assist in the preparation of the nurse staffing plan required pursuant to subsection (b) of this section. The staffing committee shall include registered nurses who provide direct patient care, licensed practical nurses and certified nursing assistants. Each nursing home, in collaboration with its staffing committee, shall develop and implement the nurse staffing plan. Such plan shall: (1) Include the minimum professional skill mix for each patient care unit in the nursing home, including any special care units; (2) identify the nursing home's employment practices concerning the use of licensed temporary and traveling nurses; (3) set forth the level of administrative staffing in each patient care unit of the nursing home that ensures direct care staff are not utilized for administrative functions; (4) set forth the nursing home's process for internal review of the nurse staffing plan; (5) identify collective bargaining agreements that the nursing home is a party to and certify the nursing home's compliance with such agreements; and (6) include the nursing home's mechanism of obtaining input from direct care staff, including licensed nurses and other members of the nursing home's patient care team, in the development of a nurse staffing plan.
- (d) Each nursing home shall employ sufficient nurses and nurse's aides to provide appropriate direct care to residents of such nursing home, twenty-four hours per day, seven days per week. Each nursing home shall maintain aggregate licensed nurse and nurse's aide staffing

53

54

55

56

57

58

59

60

61

62

63

64

65

66

67

68

69

70

71

72

73

74

75

76

77

78

79

80

81

82

83

8485

86 levels at or above the following standards:

87

88

89

90

91

92

93

94

95

96

97

98

99

100

101

102

103

104

105

106

107

108

109

110

111

112

113

114

115

116

117

- (1) On and after October 1, 2008, over a twenty-four-hour period, such nursing home shall provide not less than 3.5 hours of direct care and services per resident provided in the aggregate by licensed nurses' and nurse's aides;
- (2) On and after January 1, 2009, over a twenty-four-hour period, such nursing home shall provide not less than 3.9 hours of direct care and services per resident provided in the aggregate by licensed nurses' and nurse's aides; and
- (3) On and after May 1, 2009, over a twenty-four-hour period, such nursing home shall provide not less than 4.2 hours of direct care and services per resident provided in the aggregate by licensed nurses' and nurse's aides.
- Sec. 4. (NEW) (Effective July 1, 2008) On or before January 1, 2009, the Department of Social Services shall implement a state-wide pilot project that will allow the department to advance payments to twenty nursing homes, as defined in section 19a-537 of the general statutes, certified to participate in the Medicaid program, to cover the cost of care provided by facilities to residents who have applied for the Medicaid program and are awaiting approval by the department. The Commissioner of Social Services shall designate those facilities that shall participate in the pilot program. Not later than October 1, 2008, any nursing home facility that wishes to participate in the pilot program shall notify the commissioner of such facility's interest in participating in the program. The commissioner shall ensure that pilot program participants are broadly representative of nursing home facilities on a state-wide basis. In selecting pilot program participants, the commissioner shall consider: (1) The financial health of the facility; (2) the number of Medicaid-funded beds in the facility; (3) the total number of beds at the facility; (4) the geographic location of the facility; and (5) the facility's history of compliance with state law and regulations. The Commissioner of Social Services may adjust the

reimbursement methodology for facilities participating in the pilot program based on whether residents of the facility who applied for the Medicaid program are approved or disapproved for Medicaid program participation by the department. The pilot program shall terminate on June 30, 2010.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2008	17b-351
Sec. 2	July 1, 2008	New section
Sec. 3	October 1, 2008	New section
Sec. 4	July 1, 2008	New section

PH Joint Favorable Subst. C/R

APP